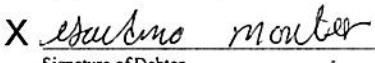
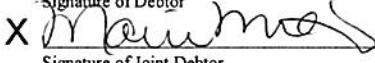


B1 (Official Form 1) (04/13)

United States Bankruptcy Court Northern District of Illinois, Western Division		Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): <b>Montes, Galdino</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Montes, Maria</b>	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): <b>1830</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): <b>7478</b>	
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>2323 Hawthorne Ln</b> <b>Sycamore, IL</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): <b>2323 Hawthorne Ln</b> <b>Sycamore, IL</b>	
ZIPCODE <b>60178-2829</b>		ZIPCODE <b>60178-2829</b>	
County of Residence or of the Principal Place of Business: <b>DeKalb</b>		County of Residence or of the Principal Place of Business: <b>DeKalb</b>	
Mailing Address of Debtor (if different from street address)		Mailing Address of Joint Debtor (if different from street address):	
ZIPCODE		ZIPCODE	
Location of Principal Assets of Business Debtor (if different from street address above):			
ZIPCODE			
<b>Type of Debtor</b> (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  <b>Chapter 15 Debtor</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:		<b>Nature of Business</b> (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <b>Nature of Debts</b> (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/1/16 and every three years thereafter).	<b>Chapter 11 Debtors</b>  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.			<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> <input type="checkbox"/> 1-49    50-99    100-199    200-999    1,000-5,000    5,001-10,000    10,001-25,000    25,001-50,000    50,001-100,000    Over 100,000			
<b>Estimated Assets</b> <input checked="" type="checkbox"/> <input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001    \$50,000,001 to \$100,000,001    \$100,000,001 to \$500,000,001    \$500,000,001 to \$1 billion    More than \$1 billion \$50,000 \$100,000 \$500,000 \$1 million \$10 million to \$50 million \$100 million to \$500 million to \$1 billion \$1 billion			
<b>Estimated Liabilities</b> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001    \$50,000,001 to \$100,000,001    \$100,000,001 to \$500,000,001    \$500,000,001 to \$1 billion    More than \$1 billion \$50,000 \$100,000 \$500,000 \$1 million \$10 million to \$50 million \$100 million to \$500 million to \$1 billion \$1 billion			

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Montes, Galdino &amp; Montes, Maria</b>
<b>All Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than two, attach additional sheet)		
Location Where Filed: <b>None</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)		
Name of Debtor: <b>None</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:
<p><b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p><b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p></p> <p><b>10/05/15</b> Signature of Attorney for Debtor(s) Date</p>
<p><b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No</p>		
<p><b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.</p>		
<p><b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.</p>		
<p><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p>_____ (Name of landlord that obtained judgment)</p> <p>_____ (Address of landlord)</p> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>		

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Montes, Galdino &amp; Montes, Maria</b>
<b>Signatures</b>		
<b>Signature(s) of Debtor(s) (Individual/Joint)</b> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p> <b>Galdino Montes</b> Signature of Debtor</p> <p> <b>Maria Montes</b> Signature of Joint Debtor</p> <p>Telephone Number (If not represented by attorney)</p> <p><b>October 5, 2015</b></p> <p>Date</p>		<b>Signature of a Foreign Representative</b> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p></p> <p>Signature of Foreign Representative</p> <p>Printed Name of Foreign Representative</p> <p>Date</p>
<b>Signature of Attorney*</b> <p></p> <p><b>Brian Wright 6304330</b>  <b>Brian Wright &amp; Associates, P.C.</b>  <b>437 West State Street Suite 101</b>  <b>Sycamore, IL 60178</b>  <b>(815) 895-2074 Fax: (847) 600-4208</b>  <b>bw@wrightandassociateslaw.com</b></p> <p><b>October 5, 2015</b></p> <p>Date</p> <p>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</p>		<b>Signature of Non-Attorney Petition Preparer</b> <p>I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>Address</p> <p></p> <p>Signature</p> <p>Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>
<p></p> <p>Signature of Authorized Individual</p> <p>Printed Name of Authorized Individual</p> <p>Title of Authorized Individual</p> <p>Date</p>		

IN RE:

Case No. \_\_\_\_\_

Montes, Galdino & Montes, Maria

Chapter 7 \_\_\_\_\_

Debtor(s)

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 30,000.00		
B - Personal Property	Yes	3	\$ 9,594.22		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 21,663.56	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		\$ 503,559.96	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	4			\$ 4,180.81
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 3,072.68
TOTAL		24	\$ 39,594.22	\$ 525,223.52	

IN RE:

Case No. \_\_\_\_\_

Montes, Galdino & Montes, Maria

Chapter 7 \_\_\_\_\_

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ <b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$ <b>0.00</b>

**State the following:**

Average Income (from Schedule I, Line 12)	\$ <b>4,180.81</b>
Average Expenses (from Schedule J, Line 22)	\$ <b>3,072.68</b>
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1 Line 14 )	\$ <b>5,316.41</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ <b>0.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ <b>0.00</b>
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ <b>0.00</b>
4. Total from Schedule F	\$ <b>503,559.96</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ <b>503,559.96</b>

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
2323 Hawthorne Ln, Sycamore, IL 60178-2829		J	30,000.00	21,663.56
		TOTAL	30,000.00	

(Report also on Summary of Schedules)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		<b>Cash in wallet</b>	J	<b>30.00</b>
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Fifth Third Bank checking account for wife</b>	W	<b>66.15</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.		<b>Fifth Third Bank joint chekcing account</b>	J	<b>818.07</b>
4. Household goods and furnishings, include audio, video, and computer equipment.	X	<b>Bedroom Set</b> <b>Couch and chair</b> <b>DVD player</b> <b>Entertainment Center</b> <b>Full size bed</b> <b>Futon bed</b> <b>Laptop</b> <b>Microwave</b> <b>Refrigerators</b> <b>Stereo</b> <b>Tablet</b> <b>Television</b> <b>50 DVD's</b>	J J J J J J J J J J J J J J J J	400.00 40.00 50.00 100.00 50.00 75.00 175.00 130.00 100.00 25.00 120.00 200.00 40.00 0.00 200.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>Clothing</b> <b>Wedding rings</b>	J J	0.00 200.00
6. Wearing apparel.				
7. Furs and jewelry.				
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
			HUSBAND, WIFE, JOINT, OR COMMUNITY	
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

**SCHEDULE B - PERSONAL PROPERTY  
(Continuation Sheet)**

0 continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. \*

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE A - REAL PROPERTY</u></b>			
2323 Hawthorne Ln, Sycamore, IL 60178-2829	735 ILCS 5/12-901	30,000.00	30,000.00
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
Cash in wallet	735 ILCS 5/12-1001(b)	30.00	30.00
Fifth Third Bank checking account for wife	735 ILCS 5/12-1001(b)	66.15	66.15
Fifth Third Bank joint chekcing account	735 ILCS 5/12-1001(b)	818.07	818.07
Bedroom Set	735 ILCS 5/12-1001(b)	400.00	400.00
Couch and chair	735 ILCS 5/12-1001(b)	40.00	40.00
DVD player	735 ILCS 5/12-1001(b)	50.00	50.00
Entertainment Center	735 ILCS 5/12-1001(b)	100.00	100.00
Full size bed	735 ILCS 5/12-1001(b)	50.00	50.00
Futon bed	735 ILCS 5/12-1001(b)	75.00	75.00
Laptop	735 ILCS 5/12-1001(b)	175.00	175.00
Microwave	735 ILCS 5/12-1001(b)	130.00	130.00
Refrigerators	735 ILCS 5/12-1001(b)	100.00	100.00
Stereo	735 ILCS 5/12-1001(b)	25.00	25.00
Tablet	735 ILCS 5/12-1001(b)	120.00	120.00
Television	735 ILCS 5/12-1001(b)	200.00	200.00
50 DVD's	735 ILCS 5/12-1001(b)	50.00	40.00
Wedding rings	735 ILCS 5/12-1001(b)	200.00	200.00
1998 Chevrolet S-10 Mileage 265,548	735 ILCS 5/12-1001(b)	775.00	775.00
2004 Chevrolet Express Mileage 162,034	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)	2,125.00 1,400.00	3,525.00
2007 Chrysler Sebring Mileage 123,984	735 ILCS 5/12-1001(c)	2,675.00	2,675.00

\* Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. <b>Country Place Mortgage PO Box 202742 Dallas, TX 75320-2742</b>	<b>J</b>					<b>21,663.56</b>	
		VALUE \$ <b>30,000.00</b>					
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
<b>0</b> continuation sheets attached			Subtotal (Total of this page)		\$ <b>21,663.56</b>	\$	
			Total (Use only on last page)		\$ <b>21,663.56</b>	\$	

(Report also on  
Summary of  
Schedules.)  
(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>A R C DeKalb LLC 520 E 22nd St Lombard, IL 60148-6110</b>	W					<b>31.71</b>
ACCOUNT NO. <b>A-TEC Ambulance Inc. 340 Commerce Dr Crystal Lake, IL 60014-3503</b>						
ACCOUNT NO. <b>ATG Credit c/o Hospitalist Medicine Consultant 1700 W Cortland St Ste 2 Chicago, IL 60622-1131</b>	W	<b>Open account 2011-04-01</b>				<b>1,006.36</b>
ACCOUNT NO. <b>Bank of America Attention: Recovery Department 4161 Piedmont Pkwy Greensboro, NC 27410-8110</b>			<b>J Revolving account 2003-08-01</b>			<b>68.00</b>
7 continuation sheets attached				<b>Subtotal (Total of this page)</b>	<b>\$ 4,224.07</b>	
				<b>Total</b>		
				(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED	
ACCOUNT NO. <b>Bank of America PO Box 982235 El Paso, TX 79998-2235</b>		<b>Assignee or other notification for: Bank of America</b>			
ACCOUNT NO. <b>Bank of New York Mellon Trust Company NA c/o Blitt &amp; Gaines P.C. 661 Glenn Ave Wheeling, IL 60090-6017</b>	J	<b>Original Creditor - Market Street Mortgage Corporation</b>			<b>42,135.47</b>
ACCOUNT NO. <b>Cach LLC c/o John C. Bonewicz, P.C. 350 N Orleans St Chicago, IL 60654-1975</b>	W	<b>Judgment account opened 1/8/201413SC1281  Garnishment</b>			<b>1,728.00</b>
ACCOUNT NO. <b>Capital 1 Bank Attn: General Correspondence PO Box 30285 Salt Lake City, UT 84130-0285</b>	W	<b>Revolving account 2006-08-01</b>			<b>2,416.00</b>
ACCOUNT NO. <b>Cap One PO Box 26625 Richmond, VA 23261-6625</b>		<b>Assignee or other notification for: Capital 1 Bank</b>			
ACCOUNT NO. <b>Capital One Bank (USA) c/o Blitt &amp; Gaines, P.C. 661 Glenn Ave Wheeling, IL 60090-6017</b>	W	<b>Judgment account opened 3/5/201413SC1063  Garnishment</b>			<b>2,167.00</b>
ACCOUNT NO. <b>Choice Recovery c/o Cardiology Associates 1550 Old Henderson Rd Columbus, OH 43220-3626</b>	J				<b>93.00</b>
Sheet no. <u>1</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>48,539.47</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.	J				
<b>City of Sycamore 308 W State St Sycamore, IL 60178-1453</b>					<b>672.00</b>
ACCOUNT NO.	W				
<b>Creditors Collection Bureau PO Box 63 Kankakee, IL 60901-0063</b>					<b>205.46</b>
ACCOUNT NO.	W				
<b>DeKalb Clinic Chartered 1850 Gateway Dr Sycamore, IL 60178-3192</b>					<b>1,328.46</b>
ACCOUNT NO.	W	<b>Open account 2013-04-01</b>			
<b>Dish Network 9601 S Meridian Blvd Englewood, CO 80112-5905</b>					<b>118.00</b>
ACCOUNT NO.		<b>Assignee or other notification for: Dish Network</b>			
<b>Afni, Inc. PO Box 3097 Bloomington, IL 61702-3097</b>					
ACCOUNT NO.	W				
<b>Dreyer Medical Group, LTD. PO Box 105173 Atlanta, GA 30348-5173</b>					<b>353.72</b>
ACCOUNT NO.	W				
<b>Elgin Lab Physicians PO Box 1509 Elgin, IL 60121-1509</b>					<b>106.38</b>
Sheet no. <b>2</b> of <b>7</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>2,784.02</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
<b>Elgin Lab Physicians PO Box 1509 Elgin, IL 60121-1509</b>	<b>W</b>				<b>49.50</b>
ACCOUNT NO.					
<b>Fifth Third Bank Fifth Third Bank Bankruptcy Department, 1830 E Paris Ave SE # Rscb3e Grand Rapids, MI 49546-6253</b>	<b>W</b>	<b>Revolving account 2009-03-01</b>			<b>1,728.00</b>
ACCOUNT NO.					
<b>Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227-1115</b>		<b>Assignee or other notification for: Fifth Third Bank</b>			
ACCOUNT NO.					
<b>Fst Fin Inv. 230 Peachtree St NW Atlanta, GA 30303-1534</b>	<b>J</b>	<b>Collection for HSBC</b>			<b>7,934.00</b>
ACCOUNT NO.					
<b>Ge Capital Retail Bank PO Box 4571 Carol Stream, IL 60197-4571</b>	<b>W</b>	<b>Open account 2013-09-01</b>			<b>2,918.00</b>
ACCOUNT NO.					
<b>Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108-2709</b>		<b>Assignee or other notification for: Ge Capital Retail Bank</b>			
ACCOUNT NO.					
<b>GE Credit/Care Credit 950 Forrer Blvd Kettering, OH 45420-1469</b>	<b>J</b>				<b>1,025.00</b>
Sheet no. <b>3</b> of <b>7</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		<b>\$ 13,654.50</b>
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
					<b>\$</b>

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED	
ACCOUNT NO. <b>Green Tree Servicing PO Box 6172 Rapid City, SD 57709-6172</b>	J	<b>10/2005</b>			<b>419,000.00</b>
ACCOUNT NO. <b>Hsbc Bank PO Box 30253 Salt Lake City, UT 84130-0253</b>	J	<b>Revolving account 2004-04-01</b>			<b>7,933.00</b>
ACCOUNT NO. <b>JAMISON D ALLEN DO 2560 Hauser Ross Dr # 450 Sycamore, IL 60178-3185</b>	W	<b>Open account 2011-01-01</b>			<b>277.00</b>
ACCOUNT NO. <b>Choice Recovery 1550 Old Henderson Rd Columbus, OH 43220-3626</b>		<b>Assignee or other notification for: JAMISON D ALLEN DO</b>			
ACCOUNT NO. <b>Kishwaukee Cardiology Associates 2530 Hauser Ross Dr # 100 Sycamore, IL 60178-3147</b>	W	<b>Open account 2013-11-01</b>			<b>93.00</b>
ACCOUNT NO. <b>Choice Recovery 1550 Old Henderson Rd Columbus, OH 43220-3626</b>		<b>Assignee or other notification for: Kishwaukee Cardiology Associates</b>			
ACCOUNT NO. <b>Kishwaukee Hospital Payment Processing Center PO Box 739 Moline, IL 61266-0739</b>	W	<b>Open account 2013-10-01</b>			<b>2,096.00</b>
Sheet no. <b>4</b> of <b>7</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		<b>\$ 429,399.00</b>
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
					<b>\$</b>

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
<b>H &amp; R Accounts Inc 453 Highway 1 W Iowa City, IA 52246-4205</b>		<b>Assignee or other notification for: Kishwaukee Hospital</b>			
ACCOUNT NO.					
<b>MOHAMMED B. GHABRA M.D. 5 Kish Hospital Dr DeKalb, IL 60115-9602</b>	W	<b>Open account 2012-10-01</b>			<b>49.00</b>
ACCOUNT NO.					
<b>Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622-1131</b>		<b>Assignee or other notification for: MOHAMMED B. GHABRA M.D.</b>			
ACCOUNT NO.					
<b>Neucort Lake Homewoners Association c/o Townsend Management 2179 Sycamore Rd Ste 107 DeKalb, IL 60115-2045</b>	J	<b>Judgment account opened 7/9/201313LM346</b>			<b>1,458.54</b>
ACCOUNT NO.					
<b>Northern Illinois ENT Specialists Collection Professionals, Inc PO Box 416 La Salle, IL 61301-0416</b>	W				<b>502.76</b>
ACCOUNT NO.					
<b>Onewest Bank IndyMac Bank/ 1 W Bank Attn Bankruptcy Department 2900 Austin, TX 78758</b>	J				<b>Unknown</b>
ACCOUNT NO.					
<b>Physicians Immediate Care 2496 Dekalb Ave Sycamore, IL 60178-3153</b>	W	<b>Open account 2011-12-01</b>			<b>983.00</b>
Sheet no. <u>5</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>2,993.30</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
<b>Creditors Protection S 308 W State St Ste 485 Rockford, IL 61101-1196</b>		<b>Assignee or other notification for: Physicians Immediate Care</b>			
ACCOUNT NO.					
<b>Prairie Point Ob/Gyn 1675 Bethany Rd # C Sycamore, IL 60178-3160</b>	W	<b>Open account 2013-07-01</b>			<b>159.00</b>
ACCOUNT NO.					
<b>Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914-2392</b>		<b>Assignee or other notification for: Prairie Point Ob/Gyn</b>			
ACCOUNT NO.					
<b>Presence Mercy Center 1325 N Highland Ave Aurora, IL 60506-1449</b>	W				<b>197.60</b>
ACCOUNT NO.					
<b>Rockford Mercantile c/o Oral Max. Surgeons 2502 S Alpine Rd Rockford, IL 61108-7813</b>	W	<b>Open account 2012-07-01</b>			<b>324.00</b>
ACCOUNT NO.					
<b>Synchrony Bank/Care Credit Attn: bankruptcy PO Box 103104 Roswell, GA 30076-9104</b>	J	<b>Revolving account 2012-01-01</b>			<b>817.00</b>
ACCOUNT NO.					
<b>Gecrb/Care Credit 950 Forrer Blvd Kettering, OH 45420-1469</b>		<b>Assignee or other notification for: Synchrony Bank/Care Credit</b>			
Sheet no. <b>6</b> of <b>7</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>1,497.60</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673</b>	W	<b>Revolving account 2010-11-01</b>			<b>150.00</b>
ACCOUNT NO. <b>Tri-Cities Surgery Center LLC 345 Delnor Dr Geneva, IL 60134-4220</b>	W	<b>Open account 2011-04-01</b>			<b>318.00</b>
ACCOUNT NO. <b>Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606-6908</b>		<b>Assignee or other notification for: Tri-Cities Surgery Center LLC</b>			
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <b>7</b> of <b>7</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		<b>\$ 468.00</b>
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		<b>\$ 503,559.96</b>

**SCHEUDLE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<b>Edgebrook Mobile Home Park 1801 Dekalb Ave Sycamore, IL 60178-3163</b>	<b>Rental lot for mobile home - renews every two years 2323 Hawthorne Lane Sycamore, IL 60178</b>

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1 **Galdino Montes**  
 First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Debtor 2 **Maria Montes**  
 (Spouse, if filing) First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

United States Bankruptcy Court for the: Northern District of Illinois, Western Division

Case number \_\_\_\_\_  
 (If known)

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Official Form 6I**

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	<u>Drywaller</u>	<u>Optician</u>
Employer's name	<u>L,C,Drywall &amp; Taping</u>	<u>Wal-Mart</u>
Employer's address	<u>916 Assell Ave</u> Number Street _____ _____	<u>702 SW 8th St</u> Number Street _____ _____
	<u>Aurora, IL 60505-1701</u> City State ZIP Code	<u>Bentonville, AR 72716-6209</u> City State ZIP Code

How long employed there? \_\_\_\_\_

7 years

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>2,813.78</u>	\$ <u>2,250.27</u>
3. Estimate and list monthly overtime pay.	3. + \$ <u>0.00</u>	+ \$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>2,813.78</u>	\$ <u>2,250.27</u>

Debtor 1

Galdino Montes

First Name Middle Name

Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here .....	→ 4. \$ <u>2,813.78</u>	\$ <u>2,250.27</u>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>277.53</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>0.00</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>0.00</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>0.00</u>
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>306.16</u>
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>299.55</u>
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>0.00</u>
5h. Other deductions. Specify: _____	5h. +\$ <u>0.00</u>	+ \$ <u>0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ <u>0.00</u>	\$ <u>883.24</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <u>2,813.78</u>	\$ <u>1,367.03</u>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm <small>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</small>	8a. \$ <u>0.00</u>	\$ <u>0.00</u>
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive <small>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</small>	8c. \$ <u>0.00</u>	\$ <u>0.00</u>
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>0.00</u>
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>0.00</u>
8f. Other government assistance that you regularly receive <small>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____</small>	8f. \$ <u>0.00</u>	\$ <u>0.00</u>
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>0.00</u>
8h. Other monthly income. Specify: _____	8h. +\$ <u>0.00</u>	+ \$ <u>0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ <u>0.00</u>	\$ <u>0.00</u>
10. Calculate monthly income. Add line 7 + line 9. <small>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.</small>	10. \$ <u>2,813.78</u> + \$ <u>1,367.03</u> = \$ <u>4,180.81</u>	
11. State all other regular contributions to the expenses that you list in Schedule J. <small>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.</small>		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. <small>Specify: _____</small>	11. + \$ <u>0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. <small>Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies</small>	12. \$ <u>4,180.81</u>	
13. Do you expect an increase or decrease within the year after you file this form?	<input type="checkbox"/> No	
	<input checked="" type="checkbox"/> Yes. Explain: <u>See Continuation Sheet</u>	

**SCHEDELE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**  
**Continuation Sheet - Page 1 of 2**

Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

**Debtor - winter season results in little to no work in construction**

**Spouse - Slow period at work for about 6 months will result in less hours (minimum 32) for full time status.**

Fill in this information to identify your case:

Debtor 1	<b>Galdino Montes</b>	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Maria Montes</b>	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Illinois, Western Division				
Case number (if known) _____				

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:  
 MM / DD / YYYY  
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents' names.

Daughter

20

No  
 Yes

Daughter

18

No  
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

Your expenses

4. \$ 781.41

4a. \$ 0.00

4b. \$ 0.00

4c. \$ 50.00

4d. \$ 0.00

Debtor 1 **Galdino Montes**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

5. **Additional mortgage payments for your residence**, such as home equity loans

5. \$ **0.00**

6. **Utilities:**

6a. Electricity, heat, natural gas  
 6b. Water, sewer, garbage collection  
 6c. Telephone, cell phone, Internet, satellite, and cable services  
 6d. Other. Specify: \_\_\_\_\_

6a. \$ **200.00**  
 6b. \$ **100.00**  
 6c. \$ **198.78**  
 6d. \$ **0.00**

7. **Food and housekeeping supplies**

7. \$ **650.00**

8. **Childcare and children's education costs**

8. \$ **0.00**

9. **Clothing, laundry, and dry cleaning**

9. \$ **100.00**

10. **Personal care products and services**

10. \$ **50.00**

11. **Medical and dental expenses**

11. \$ **50.00**

12. **Transportation.** Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ **500.00**

13. **Entertainment, clubs, recreation, newspapers, magazines, and books**

13. \$ **200.00**

14. **Charitable contributions and religious donations**

14. \$ **0.00**

15. **Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance  
 15b. Health insurance  
 15c. Vehicle insurance  
 15d. Other insurance. Specify: \_\_\_\_\_

15a. \$ **0.00**  
 15b. \$ **0.00**  
 15c. \$ **192.49**  
 15d. \$ **0.00**

16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: \_\_\_\_\_

16. \$ **0.00**

17. **Installment or lease payments:**

17a. Car payments for Vehicle 1  
 17b. Car payments for Vehicle 2  
 17c. Other. Specify: \_\_\_\_\_  
 17d. Other. Specify: \_\_\_\_\_

17a. \$ **0.00**  
 17b. \$ **0.00**  
 17c. \$ **0.00**  
 17d. \$ **0.00**

18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).**

18. \$ **0.00**

19. **Other payments you make to support others who do not live with you.**

Specify: \_\_\_\_\_

19. \$ **0.00**

20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property  
 20b. Real estate taxes  
 20c. Property, homeowner's, or renter's insurance  
 20d. Maintenance, repair, and upkeep expenses  
 20e. Homeowner's association or condominium dues

20a. \$ **0.00**  
 20b. \$ **0.00**  
 20c. \$ **0.00**  
 20d. \$ **0.00**  
 20e. \$ **0.00**

Debtor 1

**Galdino Montes**

First Name

Middle Name

Last Name

Case number (if known)

21. Other. Specify: \_\_\_\_\_

21. +\$ **0.00**

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ **3,072.68**

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ **4,180.81**

23b. Copy your monthly expenses from line 22 above.

23b. - \$ **3,072.68**

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ **1,108.13**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

**Parties will be divorcing.**

IN RE Montes, Galdino & Montes, Maria

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: October 5, 2015Signature: Isabelo Montes

Galdino Montes

Debtor

Date: October 5, 2015Signature: Maria Montes

Maria Montes

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

IN RE:

Montes, Galdino & Montes, Maria

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

**49,954.00 Debtors gross income in 2014**

**41,430.00 Debtors gross income in 2013**

### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

**108.63 Cash in Walmart stock (wife) from 2014**

### Cash in Stock

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
CountryPlace Mortgage PO Box 202742 Dallas, TX 75320-2742	15th of every month	291.41	21,934.70

**Home loan**

**b. Debtor whose debts are not primarily consumer debts:** List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**c. All debtors:** List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
Gabriella Schrieber	10/13	2,500.00	0.00
Alma Delgado	12/13	3,000.00	0.00

**4. Suits and administrative proceedings, executions, garnishments and attachments**

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>H &amp; R ACCOUNTS, INC. as ASSIGNEE of Kishwaukee Hospital FKA Kishwaukee Community Hospital v. Maria Montes 14 SC 283</b>	<b>Medical Bill Damages</b>	<b>DeKalb County Small Claims Division 7017 John Deere Pkwy Moline, IL 61265-8072</b>	
<b>AMT: \$2095.72 plus costs</b>			
<b>The Bank of New York Mellon Trust Company, N.A., v. Galdino Montes and Maria Montes CASE NO. 15 LM 304</b>	<b>2nd Mortgage</b>	<b>Circuit Court of DeKalb County, Illinois 661 Glenn Ave Wheeling, IL 60090-6017</b>	<b>Judgment amount: \$42,135.47 Costs: \$258.00 Attorney's Fees: \$350.00</b>
<b>MIDLAND FUNDING LLC, v. MARIA MONTES and WAL-MART STORES, INC., SAMS CLUB No. 2014 SC 00235</b>	<b>Wage Garnishment</b>	<b>Circuit Court of DeKalb County, Illinois PO Box 489 Normal, IL 61761-0489</b>	
<b>NEUCORT LAKES HOME vs. Maria Montes 13LM346</b>	<b>Judgment</b>		<b>Unsatisfied - \$1,058.00</b>
<b>CAPITAL ONE BANK USA vs. Maria Montes 13SC1063</b>	<b>Judgment Writ of Garnishment</b>	<b>Clerk of the Circuit Court, DeKalb County 661 Glenn Ave Wheeling, IL 60090-6017</b>	<b>Unsatisfied - \$2,167.00</b>
<b>CACH LLC vs. Maria A. Montes 13SC1281</b>	<b>Judgment Wage Garnishment</b>	<b>DE KALB LAW MAGISTRATE 350 N Orleans St Chicago, IL 60654-1975</b>	<b>Unsatisfied - \$1,728.00</b>

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
Green Tree One West Bank	8/2013	Foreclosure on home - \$209,000

## 6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 7. Gifts

None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
123 Credit Counselors, Inc.	9/11/2015	\$18.00

**Both Galdino and Maria did counseling**

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Brian Wright & Associates, P.C. 437 W State St Ste 101 Sycamore, IL 60178-1410		\$1,200.00

## 10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

## 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

## 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
<b>187 E Warbler Ave, Cortland, IL, 60112-4084</b>	<b>Galdino and Maria Montes</b>	<b>10/2005 - 8/2013</b>

## 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## 17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

## 18. Nature, location and name of business

None a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

#### 19. Books, records and financial statements

None a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within the **two years** immediately preceding the commencement of this case.

#### 20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

#### 21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

#### 22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

#### 23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

#### 24. Tax Consolidation Group

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

#### 25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: October 5, 2015

Signature  
of Debtor



**Galdino Montes**

Date: October 5, 2015

Signature  
of Joint Debtor  
(if any)



**Maria Montes**

0 continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

IN RE:

Montes, Galdino & Montes, Maria

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** – Debts secured by property of the estate. (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

Property No. 1	
<b>Creditor's Name:</b> Country Place Mortgage	<b>Describe Property Securing Debt:</b> 2323 Hawthorne Ln, Sycamore, IL 60178-2829
Property will be ( <i>check one</i> ): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to ( <i>check at least one</i> ): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is ( <i>check one</i> ): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No. 2 (if necessary)	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>
Property will be ( <i>check one</i> ): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to ( <i>check at least one</i> ): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is ( <i>check one</i> ): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** – Personal property subject to unexpired leases. (*All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.*)

Property No. 1		
<b>Lessor's Name:</b> Edgebrook Mobile Home Park	<b>Describe Leased Property:</b> Rental lot for mobile home - renews every two years	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

\_\_\_\_\_ continuation sheets attached (*if any*)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: October 30, 2015

Signature of Debtor

Signature of Joint Debtor

United States Bankruptcy Court  
Northern District of Illinois, Western Division

IN RE:

Montes, Galdino & Montes, Maria

Case No. \_\_\_\_\_

Debtor(s)

Chapter 7 \_\_\_\_\_

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 43

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: October 5, 2015

Juliana Montes

Debtor

Maria Montes

Joint Debtor

A R C DeKalb LLC  
520 E 22nd St  
Lombard, IL 60148-6110

A-TEC Ambulance Inc.  
340 Commerce Dr  
Crystal Lake, IL 60014-3503

Afni, Inc.  
PO Box 3097  
Bloomington, IL 61702-3097

Atg Credit  
1700 W Cortland St Ste 2  
Chicago, IL 60622-1131

ATG Credit  
c/o Hospitalist Medicine Consultant  
1700 W Cortland St Ste 2  
Chicago, IL 60622-1131

Bank of America  
Attention: Recovery Department  
4161 Piedmont Pkwy  
Greensboro, NC 27410-8110

Bank of America  
PO Box 982235  
El Paso, TX 79998-2235

Bank of New York Mellon Trust Company NA  
c/o Blitt & Gaines P.C.  
661 Glenn Ave  
Wheeling, IL 60090-6017

Cach LLC  
c/o John C. Bonewicz, P.C.  
350 N Orleans St  
Chicago, IL 60654-1975

Cap One  
PO Box 26625  
Richmond, VA 23261-6625

Capital 1 Bank  
Attn: General Correspondence  
PO Box 30285  
Salt Lake City, UT 84130-0285

Capital One Bank (USA)  
c/o Blitt & Gaines, P.C.  
661 Glenn Ave  
Wheeling, IL 60090-6017

Choice Recovery  
c/o Cardiology Associates  
1550 Old Henderson Rd  
Columbus, OH 43220-3626

Choice Recovery  
1550 Old Henderson Rd  
Columbus, OH 43220-3626

City of Sycamore  
308 W State St  
Sycamore, IL 60178-1453

Country Place Mortgage  
PO Box 202742  
Dallas, TX 75320-2742

Creditors Collection B  
755 Almar Pkwy  
Bourbonnais, IL 60914-2392

Creditors Collection Bureau  
PO Box 63  
Kankakee, IL 60901-0063

Creditors Protection S  
308 W State St Ste 485  
Rockford, IL 61101-1196

DeKalb Clinic Chartered  
1850 Gateway Dr  
Sycamore, IL 60178-3192

Dish Network  
9601 S Meridian Blvd  
Englewood, CO 80112-5905

Dreyer Medical Group, LTD.  
PO Box 105173  
Atlanta, GA 30348-5173

Edgebrook Mobile Home Park  
1801 Dekalb Ave  
Sycamore, IL 60178-3163

Elgin Lab Physicians  
PO Box 1509  
Elgin, IL 60121-1509

Fifth Third Bank  
Fifth Third Bank Bankruptcy Department,  
1830 E Paris Ave SE # Rscb3e  
Grand Rapids, MI 49546-6253

Fifth Third Bank  
5050 Kingsley Dr  
Cincinnati, OH 45227-1115

Fst Fin Inv.  
230 Peachtree St NW  
Atlanta, GA 30303-1534

Ge Capital Retail Bank  
PO Box 4571  
Carol Stream, IL 60197-4571

GE Credit/Care Credit  
950 Forrer Blvd  
Kettering, OH 45420-1469

Gecrb/Care Credit  
950 Forrer Blvd  
Kettering, OH 45420-1469

Green Tree Servicing  
PO Box 6172  
Rapid City, SD 57709-6172

H & R Accounts Inc  
453 Highway 1 W  
Iowa City, IA 52246-4205

Hsbc Bank  
PO Box 30253  
Salt Lake City, UT 84130-0253

JAMISON D ALLEN DO  
2560 Hauser Ross Dr # 450  
Sycamore, IL 60178-3185

Kishwaukee Cardiology Associates  
2530 Hauser Ross Dr # 100  
Sycamore, IL 60178-3147

Kishwaukee Hospital  
Payment Processing Center  
PO Box 739  
Moline, IL 61266-0739

Merchants Credit Guide  
223 W Jackson Blvd Ste 4  
Chicago, IL 60606-6908

Midland Funding  
2365 Northside Dr Ste 30  
San Diego, CA 92108-2709

MOHAMMED B. GHABRA M.D.  
5 Kish Hospital Dr  
DeKalb, IL 60115-9602

Neucort Lake Homewoners Association  
c/o Townsend Management  
2179 Sycamore Rd Ste 107  
DeKalb, IL 60115-2045

Northern Illinois ENT Specialists  
Collection Professionals, Inc  
PO Box 416  
La Salle, IL 61301-0416

Onewest Bank  
IndyMac Bank/  
1 W Bank Attn Bankruptcy Department 2900  
Austin, TX 78758

Physicians Immediate Care  
2496 Dekalb Ave  
Sycamore, IL 60178-3153

Prairie Point Ob/Gyn  
1675 Bethany Rd # C  
Sycamore, IL 60178-3160

Presence Mercy Center  
1325 N Highland Ave  
Aurora, IL 60506-1449

Rockford Mercantile  
c/o Oral Max. Surgeons  
2502 S Alpine Rd  
Rockford, IL 61108-7813

Synchrony Bank/Care Credit  
Attn: bankruptcy  
PO Box 103104  
Roswell, GA 30076-9104

Td Bank USA/Targetcred  
PO Box 673  
Minneapolis, MN 55440-0673

Tri-Cities Surgery Center LLC  
345 Delnor Dr  
Geneva, IL 60134-4220

## UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors****Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

United States Bankruptcy Court  
Northern District of Illinois, Western Division

IN RE:

Case No. \_\_\_\_\_

Montes, Galdino & Montes, Maria

Chapter 7

Debtor(s)

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE

## Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

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Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

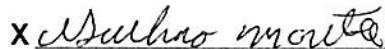
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

## Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Montes, Galdino & Montes, Maria

Printed Name(s) of Debtor(s)



10/05/2015

Signature of Debtor

Case No. (if known) \_\_\_\_\_



10/05/2015

Signature of Joint Debtor (if any)

Date

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.